## State of Indiana Comparative Analysis 2008 Rates

## **Single Coverage**

	Anthem	HDHP-HSA	HDHP-HSA	Welborn
2008	Trad II	One	Two	
Annual EE Premium	1,459.38	-	415.22	417.04
*Plan Max. Out of Pocket	2,000.00	4,000.00	2,400.00	2,000.00
HDHP-HSA Contribution	-	(1,375.00)	(935.00)	-
Total	3,459.38	2,625.00	1,880.22	2,417.04
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2007				
Annual EE Premium	1,265.68	-	370.76	481.78
*Plan Max. Out of Pocket	2,000.00	4,000.00	2,400.00	2,000.00
HDHP-HSA Contribution	-	(1,375.00)	(935.00)	-
Total	3,265.68	2,625.00	1,835.76	2,481.78

## **Family Coverage**

	Anthem	HDHP-HSA	HDHP-HSA	Welborn
	Trad II	One	Two	
2008				
Annual EE Premium	4,013.62	-	1,133.08	1,161.16
* Plan Max. Out of Pocket	4,000.00	8,000.00	4,800.00	4,000.00
HDHP-HSA Contribution	-	(2,750.00)	(1,870.00)	
Total	8,013.62	5,250.00	4,063.08	5,161.16
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2007				
Annual EE Premium	3,481.14	-	958.88	1,339.00
*Plan Max. Out of Pocket	4,000.00	8,000.00	4,800.00	4,000.00
HDHP-HSA Contribution	-	(2,750.00)	(1,870.00)	-
Total	7,481.14	5,250.00	3,888.88	5,339.00

<sup>\*</sup>Each plan has differing definitions for what expenses accrue to the maximum out of pocket

Rx co-pay(s) do not accrue to maximum out of pocket for Anthem Trad II All co-pay(s) do not accrue to maximum out of pocket for Welborn